

Pro Se 15 (Rev. 12/16) Complaint for Violation of Civil Rights (Non-Prisoner)

UNITED STATES DISTRICT COURT

for the

Western District of Washington

Division

Alonzo Jamichael Severson

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Vivendi
Major League Baseball
Disney, Universal Music Group.

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Case No.

2:25-W-01034-LK

(to be filled in by the Clerk's Office)

Jury Trial: (check one)



Yes



No

FILED
LODGEDENTERED
RECEIVED

MAY 30 2025

RE

BY AT SEATTLE
CLERK U.S. DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON
DEPUTY

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Non-Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name
Address

Alonzo Jamichael Severson
5010 SW 317th Ln Apt T303
Federal Way WA 98023
City State Zip Code

County
Telephone Number
E-Mail Address

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name
Job or Title (if known)
Address

Disney

500 South Buena Vista Street
Burbank CA 91526
City State Zip Code

County
Telephone Number
E-Mail Address (if known)

LA County

☒ Individual capacity ☒ Official capacity

Defendant No. 2

Name
Job or Title (if known)
Address

Universal Music Group

2220 Colorado Ave
Santa Monica CA 90404
City State Zip Code

County
Telephone Number
E-Mail Address (if known)

LA county

☒ Individual capacity ☒ Official capacity

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Defendant No. 3

Name

Job or Title (if known)

Address

Major League Baseball

1271 Avenue of Americas

New York
CityNY
State10020
Zip Code

County

Telephone Number

E-Mail Address (if known)



Individual capacity



Official capacity

Defendant No. 4

Name

Job or Title (if known)

Address

Vivendi

42 Ave de Frieland

PARIS
CityFRANCE
State75008
Zip Code

County

Telephone Number

E-Mail Address (if known)



Individual capacity



Official capacity

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

Federal officials (a *Bivens* claim)

State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

2P Act of 2008

110th Congress Public Law 110-408

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

Theft of Intellectual Property - Defendants use stolen property to gain money and success, and did so,

III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. Where did the events giving rise to your claim(s) occur?

King County Jail

- B. What date and approximate time did the events giving rise to your claim(s) occur?

2016 - 2017

- C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

Loss of Life, Loss of Life's Work

IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Mental Health to this day:

PTSD

Insomnia

Social Anxiety

Vast Paranoia

Loss of family and friend

Deep Depression

V. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

For comes out:

Copyright Infringement

Patent Infringement

Trade mark Infringement

I, Alonzo Jamichael Swanson
as request the amount of 7 -

Disney: ten trillion dollars

\$ 10,000,000,000,000

Major League Baseball: ten trillion dollars

\$ 10,000,000,000,000

Universal Music Group: ten trillion dollars

\$ 10,000,000,000,000

ViVendi: ten trillion dollars

\$ 10,000,000,000,000

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: May, 30, 2025

Signature of Plaintiff

Printed Name of Plaintiff

Alonso Jefferson UCC 1-308

B. For Attorneys

Date of signing: _____

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

City

State

Zip Code

Telephone Number

E-mail Address

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Alonzo Severson
B. E-MAIL CONTACT AT FILER (optional)
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div style="border: 1px solid black; padding: 5px; width: fit-content;"> ALONZO SEVERSON 1733 Grove st Bremerton WA USA 98311 </div>

Date of Filing : 03/23/2020
Time of Filing : 02:23:00 AM
File Number : 2020-083-2044-3
Lapse Date : NONE

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME ALONZO JAMICHAEL SEVERSON				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1733 Grove st	Bremerton	WA	98311	USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
6969 Provost rd nw	Bremerton	WA	[98312]	USA

4. COLLATERAL: This financing statement covers the following collateral:

This is the entry of the collateral entry record owner: Alonzo Jamichael Severson, and Debtor; ALONZO JAMICHAEL SEVERSON, in the Commercial Chamber under the necessity and the following property is hereby registered in the same: All Certificates of Birth Document #1000842 as herein likened and claimed at a sum certain \$100,000,000.00, Washington state Driver License #SEVERAJ095L3, WA IDENTIFICATION CARD# WDL4T859C63B UCC Contract Trust Account# xxx-xx-7018 Exemption ID# G21737777, AUTOTRIS AND CUSIP# XXX-XX-7018, Security Agreement # 121619-1-s/a, Power of

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input checked="" type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input checked="" type="checkbox"/> A Debtor is a Transmitting Utility	6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licenser	
8. OPTIONAL FILER REFERENCE DATA:	

Continuation of section 4 collateral

4. This FINANCING STATEMENT covers the following collateral:

attorney item # 121619-2 (HHIA) Hold Harmless and Indemnity # 05222019-AAJS, Copyright notice # 052507CLC. Said registration to secure rights, title(s) and interest in and of the Root of Title and Birth Certificate #1000842 as received by GEORGIA DEPARTMENT OF HEALTH AND WELFARE (Division of Vital Statistics) DNA, retina scans, and all debentures, indentures, Accounts and all the Pledges represented by same included by, not limited to the pignus, hypothetical, hereditments, res, the energy and all products derived therefrom, nunc pro tunc, but not limited to all capitalized names, ALONZO JAMICHAEL SEVERSON, ALONZO J SEVERSON, AJS, AS, and SEVERSON, ALONZO.